	A ETHICS AND	
FOR INSTRUCTIONS, SEE BACK OF FORM	-7-121 112 120 125 - FOR	
CHECK ONE:	DR-	1 OF
This is an initial* Statement of Organization		01/2006) ORGANIZATION
Li i i i s an amended Statement of Organization	For O	ffice Use Only
*An initial Statement of Organization must be filed within 10 days of the comaking expenditures, or incurring indebtedness exceeding \$750. Amenda	and much be find within 00 decree	
a change. Penalties may be imposed for late-filed Statements of Organiza	dia A	
committee that exceeds \$750 in activity for another office shall file within 1	O down oither a new or emended	
DR-1 disclosing information concerning the campaign for the new office so		mer
COMMITTEE-NAME ↓ ↓ (A candidate's committee must include the	e candidate's last name in the name of the com	emittoo)
	Condition and that the traine of the con	a indee.
Uceachs for Sherift		
IMPORTANT: Indicate type of committee you are reporting for:	County Candidate	
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) Statewide PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC		
(10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue(including committee involved in multiple city/county ballot issues)		
		, , , , , , , , , , , , , , , , , , ,
COMMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHAIR (mandatory ex	cept for a candidate's committee)
Name + Gaule Goedens	Name ↓ ↓	
Mailing Address I I S I (C. () - (Mailing Address	
2304-18th Street	Mailing Address ↓ ↓	
City, State ↓ ↓ / Zip,Code ↓ ↓	City, State ↓ ↓ Zip Code ↓ ↓	
Emmetsburg, Iowa 50536		
Phone (7/2) 852 - 4543	Phone ()	
	Phone ()	
e-Mail djg @ ncn.net	e-Mail	
INDICATE PURPOSE OF COMMITTEE - Check One Box X Advocate for/against candidate(s) Advocate for ballot issue(s)		
Comment or description: to promote election of G	oeders for Sheriff a Advocate:	against ballot issue(s)
All Candidates Enters ()		Il Ballot Committees Enter:
Office Sought Palo Alto County Sheri		0 00000
Political Party (if applicable)Demo chat	County: 1000 HCTO ((If active in multiple ballot issue election)	ourt
10.0	n1 /	
2000	Date of Election: NOVember	4. <i>20</i> 08
Year Standing for Election: 2009		,
Bank Account Name	Candidate name & Address or Parent Er	
Bank Account Name		ntity (PACs, if applicable), or Sponsor
All campaign expenses mid-from		
Bank Account Name	Affiliate.	
Bank Account Name All Comparison expenses and from Name of Financial Institution/type of Account	Dennis J. Goed	
PALL COMPAGEM EXPENSES AND FROM Name of Finandial Institution/type of Account DEVSONAL FUNDS	Dennis J. Goed Mailing Address 3304-184 Str	eet
Bank Account Name All Comparison expenses and from Name of Financial Institution/type of Account	Dennis J. Good Mailing Address 3304 - 18 44 Sho City + State	eet Zip Zip
Bank Account Name HU Qam Quight expenses and from Name of Finantial Institution/type of Account Dersonal funds Majling Address 1	Dennis J. Good Mailing Address 3304 - 18 44 Sho City + State	eet Zip Zip
PALL COMPAGEM EXPENSES AND FROM Name of Finandial Institution/type of Account DEVSONAL FUNDS	Dennis J. Goed Mailing Address 3304-1844 Strate City + State Emmet Sourg To	ect Zip Zip
Bank Account Name HU Qam Quight expenses and from Name of Finantial Institution/type of Account Dersonal funds Majling Address 1	Dennis J. Goed Mailing Address $304-184$ State Emmet Sturg Phone (112) 852-4543	eet Zip Zip
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